

UWPD SPLAAAF & Tb - 2020 Instructions - Desktop

UWPD has annual requirements for SPLAAAF (Service personnel limited animal area access form) and Tb (tuberculosis). SPLAAAF training includes an initial/annual Canvas course & MyUHS form completion. Tb includes a risk assessment questionnaire and reactive skin test for employees at UW Health. Complete the following steps and reach out for individual support per the help section. See next pages for step-by-step screenshots in Canvas and MyUHS.

SPLAAAF

1. Enroll or login to the Canvas course “Environmental & Occupational Health”

- Go to www.wisc.edu > MyUW > Canvas
- Login with your NetID, password, and DUO
- Click to open course on dashboard or self-enroll at <https://canvas.wisc.edu/enroll/FNTBLH>

2. Complete and submit the “SPLAAAF Training” quiz

- Click Home course module “Animal Contact” and “SPLAAAF Training”
- Click “Take Quiz” to view video and answer quiz questions
- Click “Submit” to record quiz completion

3. Go to MyUHS to complete and submit required Occ. Med. form(s).

- Click the “MyUHS” in Canvas or at www.uhs.wisc.edu and click “UW Madison NetID” to login
- Click “Forms” on left for Occupational Medicine forms 1 & 2 status. If no check mark next to form at page bottom, then complete and submit. Continue if both have check marks.
- Click “Messages” on left, “New Message,” UW Employee, Affiliate or Contract Worker, and **SERVICE PERSONNEL LIMITED ANIMAL AREA ACCESS FORM** to complete and submit questionnaire.

Tb

- Click “Messages” on left, “New Message,” UW Employee, Affiliate or Contract Worker, and **OM TB RISK ASSESSMENT** to complete and submit questionnaire.

HELP

- Go to your supervisor, <https://www.uhs.wisc.edu/eoh/animal-contact/> (SPLAAAF) or <https://www.uhs.wisc.edu/eoh/assessments/> (Tb) for more info.
- For Canvas support, contact Tara Cordes at 1-608-622-9763 or tara.cordes@wisc.edu and read more at <https://www.uhs.wisc.edu/eoh/eoh-training/>.
- For MyUHS support, contact Occupational Medicine at eoh@uhs.wisc.edu



Desktop Instructions
for **UWPD**
SPLAAAF & Tb
2020 annual requirements



Steps to complete SPLAAAF & Tb tasks in Canvas & MyUHS

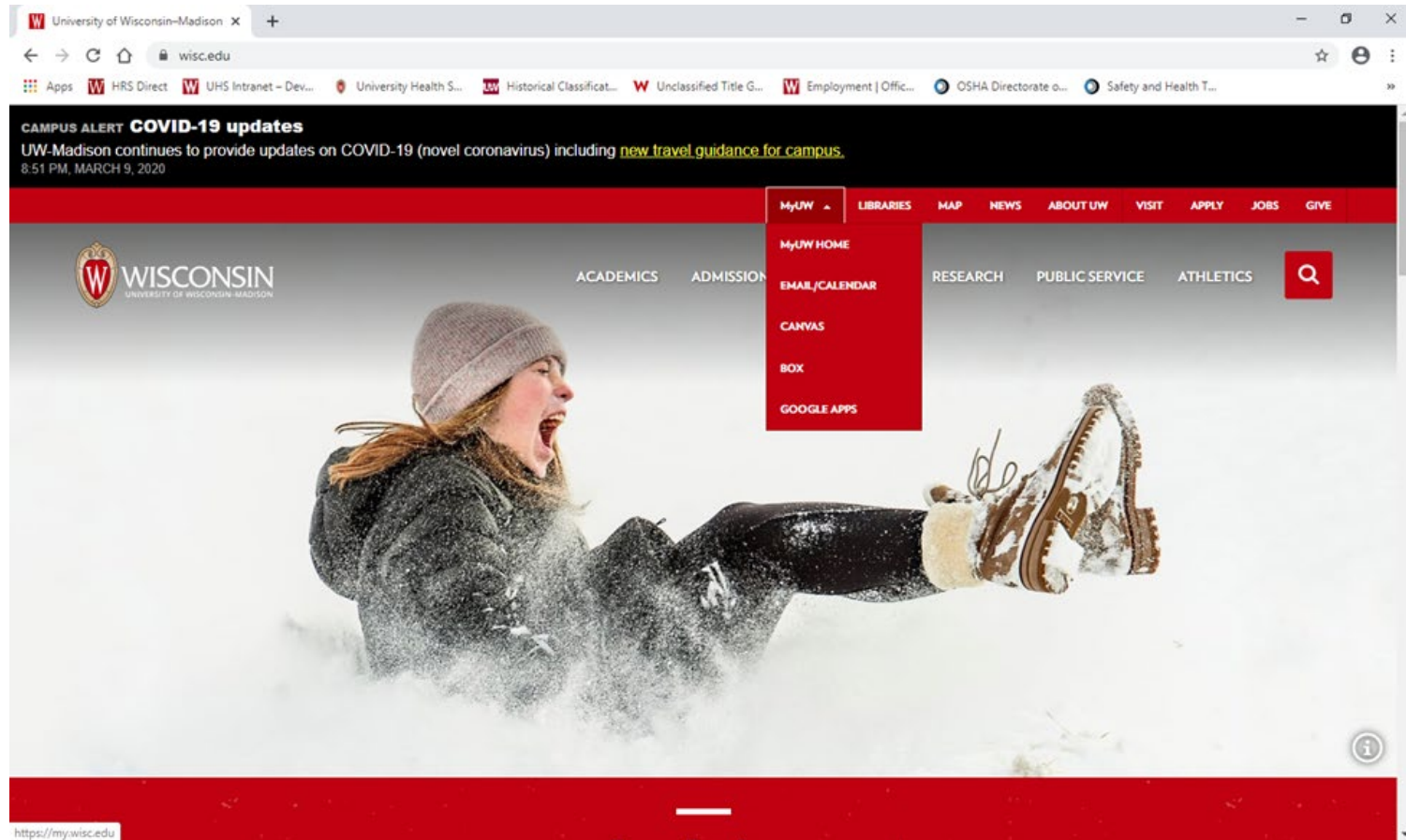
1. Login/enroll in **Canvas** course “Environmental & Occupational Health” to
 - view the training presentation and
 - submit “**SPLAAAF Training Quiz**”.
2. Login to **MyUHS** to
 - confirm completion of or submit Occupational Medicine forms 1 & 2,
 - submit **SPLAAAF** questionnaire in MyUHS, and
 - submit “**OM TB RISK ASSESSMENT**’ questionnaire in MyUHS.



1. Login/enroll in Canvas course
“Environmental & Occupational Health”
to view the training presentation and
submit “SPLAAAF Training Quiz”.



Click on **Canvas** under **MyUW** at www.wisc.edu.





Enter your NetID, password and DUO authenticate with fob or phone app.

The screenshot shows a web browser window with the URL `login.wisc.edu/idp/profile/SAML2/Redirect/SSO?execution=e2s1`. The browser's address bar and tabs are visible. Below the browser window is a red header with the University of Wisconsin-Madison logo and the text "University of Wisconsin-Madison Login".

Login

NetID [Forgot NetID](#)

Password [Forgot password](#)

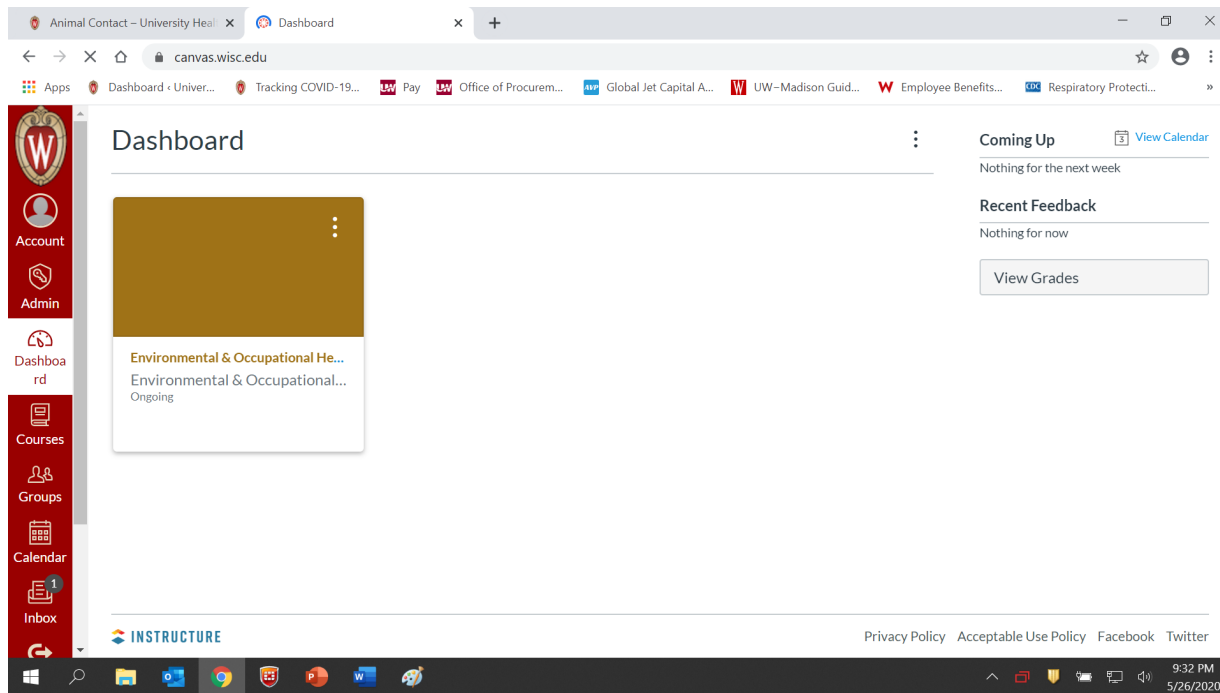
[Log In](#)

Need help?

- [Activate your NetID](#)
- [Modify your account](#)
- [Create a strong password](#)
- [Common login questions](#)
- [Contact the Help Desk](#)



Click on “Environmental & Occupational Health” course.

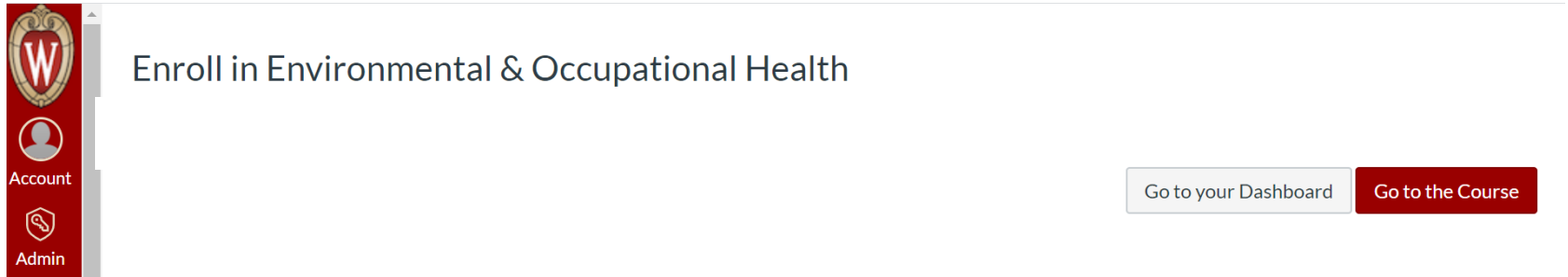


** If course is not on dashboard or in “Courses”, see next slide to self-enroll in the course using a new browser window or tab.*



Open another browser window or tab and enter the following address to self-enroll in the course.

<https://canvas.wisc.edu/enroll/FNTBLH>.



Click “**Enroll in the course**” and “**Go to the Course**” in upper right hand corner of each screen.



Click on “**Animal Contact**” to open module and select “**SPLAAAF Training**”.

Environmental & Occupational Health > Modules

Ongoing

View Progress + Module

Home

Animal Contact	✓ +
Service Personnel Limited Animal Area Access Form (SPLAAAF)	✓
SPLAAAF Training 1 pts	✓
Resources	✓
2020 SPLAAAF detailed instructions (mobile device)	✓
MyUHS SPLAAAF questionnaire detailed instructions (desktop)	✓
https://www.uhs.wisc.edu/ohp/animal-contact/	✓

9:53 PM
5/26/2020



Scroll down and click “**Take Quiz**” or “Resume Quiz” at page bottom.

Resume Quiz

Next ▶



Click the play icon to watch video presentation.

The image shows a video player interface. The video title is "SPLAAAF Training". The video content features a red background with the University of Wisconsin-Madison logo at the top left. The main text on the screen reads "Service Personnel Limited Animal Access Form (SPLAAAF) Training". Below this, it lists the departments: "University Health Services (UHS), Environmental & Occupational Health (EOH) and Occupational Medicine (OM)". A large black play button is centered over the video. The video player controls at the bottom show a progress bar at 0:00 / 3:21, a volume icon, a 1x speed setting, a settings gear icon, a full screen icon, and the University of Wisconsin-Madison logo.



Answer the quiz questions and click “**Submit Quiz**” button.

EOH Training – University Health | Quiz: SPLAAAF Training

canvas.wisc.edu/courses/71552/quizzes/155873/take?preview=1

Apps | Dashboard · Univer... | Tracking COVID-19... | Pay | Office of Procurem... | Global Jet Capital A... | UW–Madison Guid... | Employee Benefits... | Respiratory Protecti...

Where can I direct my questions and comments on how to protect myself in animal areas?

- supervisor
- building or lab manager
- support staff at EHS and UHS
- all the above

Click the "Submit Quiz" button lower right and then login to [MyUHS](#) to complete required form(s).

Not saved **Submit Quiz**

Account
Admin
Dashboard
Courses
Groups
Calendar
Inbox

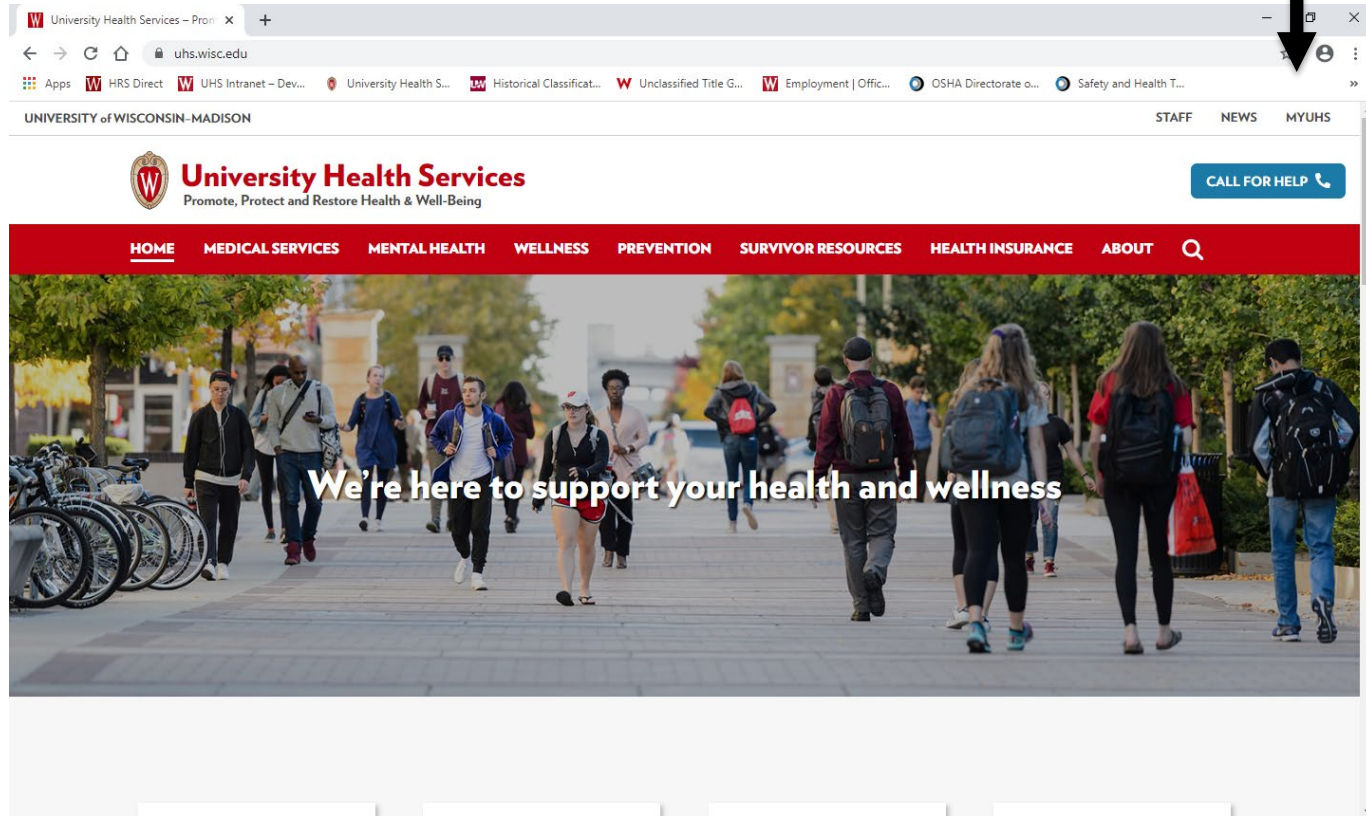
10:27 PM
5/26/2020



2. Login to MyUHS to
confirm completion of or submit
Occupational Medicine forms 1 & 2.

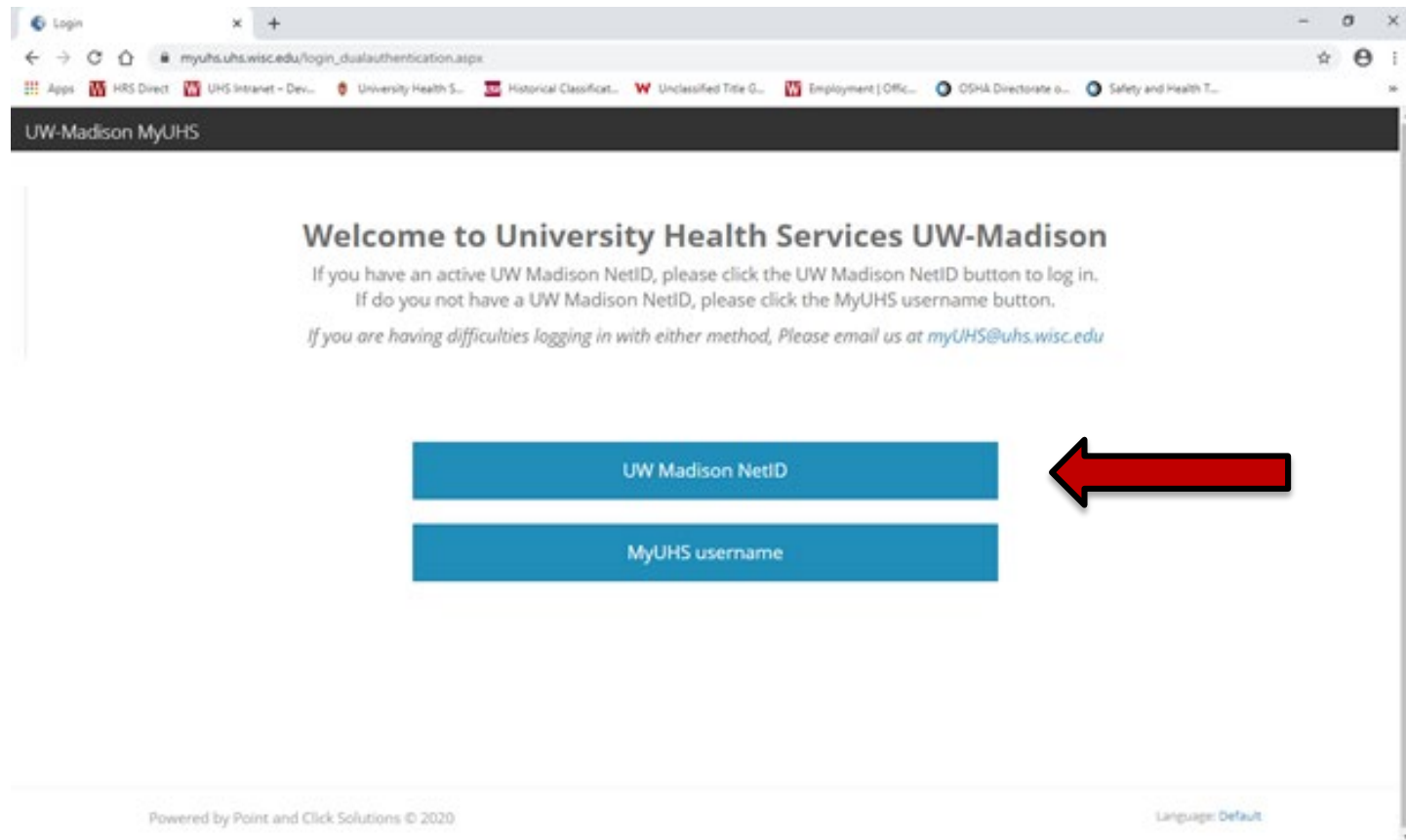


Select “MyUHS” at <https://myuhs.uhs.wisc.edu>.





Select “**UW Madison NetID**” to login with NetID, password and DUO if not already logged in.





Enter your birthday with 4 digit year to continue logging into MyUHS.

UW-Madison MyUHS

Welcome back! To confirm your identity, you must provide the following additional personal information:

Please confirm your Date of Birth:

▼ ▼

Proceed Cancel

Powered by Point and Click Solutions © 2020 Language: Default

** If you have a birthday error message, please work with your division/school/college human resources to correct your birthdate, and try again to login again after 2 days.*



Select “Forms” in the left column.

W-Madison MyUHS Testing Sp

- Home
- Profile
- Appointments
- Groups/Workshops
- Messages
- Letters
- Forms
- Survey Forms
- Account Statements
- UHS Health Record
- Immunizations

Home

You last logged in: 3/6/2018 12:18:32 PM
[Conditions of Use](#)

You Can Receive Text Message Appointment Reminders and Other Alerts: [Enable Text Messages](#)

Welcome to MyUHS
DO NOT open multiple MyUHS tabs! Doing so will cause unexpected errors.

To protect your private health information **you must either log out of MyUHS or close your browser when finished in MyUHS.** Simply closing the MyUHS tab will NOT log you out. Failure to do so may result in others being able to view your information. Please click on "[Conditions of Use](#)" above for further instructions on using MyUHS.

[Advanced Options]
You are seeing this link because your patient record is configured as a testing record.

[Version: 12.11.4124] [Connection Service: 12.11.0.4124]



Scroll to page bottom to check if one-time **Occupational Medicine forms 1 & 2** are complete.

UW-Madison MyUHS

Name: **Spyder, Arachne A**
 School:
 ID Number: **N000203068**

Complete all forms in the list below. Once submitted these forms cannot be changed. Enter subsequent immunization updates by click blue "Immunizations" link.

Students and other individuals eligible to receive medical and mental health services at UHS should complete these forms prior to arrival on cam

Employees and others who require occupational medicine services related to their activities on campus must complete the forms below prior to services or clearance.

- ENTRANCE FORM: Personal Health History, Family Health History, Medications, Allergies
- ENTRANCE FORM: Immunizations
- ENTRANCE FORM: Personal Information
- MENTAL HEALTH: Informed Participation Agreement
- NON-STUDENT: Privacy and Consent Form
- OCCUPATIONAL MEDICINE: 1. Privacy Notice and Consent to Treat
- OCCUPATIONAL MEDICINE: 2. Authorization for Release of Occupational Health Records

Students should review their health history and family health history with family members and gather their health information including medi immunization records and prior to opening these forms.

Click on the blue link(s) below to access the form(s). Once submitted the form will be marked "Completed".

Form Name	Status
ENTRANCE FORM: Personal Health History, Family Health History, Medications, Allergies	✓ Completed: Submitted on: Thursday, March 9, 2017 1:37 PM
ENTRANCE FORM: Immunizations	✓ Completed: Submitted on: Thursday, March 9, 2017 1:13 PM
ENTRANCE FORM: Personal Information	✓ Completed: Submitted on: Thursday, March 9, 2017 1:15 PM
MENTAL HEALTH: Informed Participation Agreement	Not Yet Complete: Please provide the requested information with special attention to the required fields.
NON-STUDENT: Privacy and Consent Form	Not Yet Complete: Please provide the requested information with special attention to the required fields.
OCCUPATIONAL MEDICINE: 1. Privacy Notice and Consent to Treat	Not Yet Complete: Please provide the requested information with special attention to the required fields.
OCCUPATIONAL MEDICINE: 2. Authorization for Release of Occupational Health Records	Not Yet Complete: Please provide the requested information with special attention to the required fields.

If **“Net Yet Complete”**, click on blue form title link to complete and submit each form’s required fields ******.



Continue when Occ. Med. Forms 1 & 2 are “√ Completed”.

UW-Madison MyUHS
Testing Spyder

- Home
- Profile
- Appointments
- Groups/Workshops
- Messages
- Letters
- Forms
- Survey Forms
- Account Statements
- UHS Health Record
- Immunizations

Immunization, Health History, Insurance, Personal Information and Occupational Medicine Entrance Forms

Name: **Spyder, Testing T**
 School:
 ID Number: **N000198945**

Complete all forms in the list below. Once submitted these forms cannot be changed. Enter subsequent immunization updates by clicking on the blue "Immunizations" link.

Students and other individuals eligible to receive medical and mental health services at UHS should complete these forms prior to arrival on campus.

Employees and others who require occupational medicine services related to their activities on campus must complete the forms below prior to receiving services or clearance.

- MENTAL HEALTH: Informed Participation Agreement
- MENTAL HEALTH: Informed Participation Agreement (Non-Student)
- OCCUPATIONAL MEDICINE: 1. Privacy Notice and Consent to Treat
- OCCUPATIONAL MEDICINE: 2. Authorization for Release of Occupational Health Records

Students should review their health history and family health history with family members and gather their health information including medication and immunization records and prior to opening these forms.

Click on the blue link(s) below to access the form(s). Once submitted the form will be marked "Completed".

Form Name	Status
MENTAL HEALTH: Informed Participation Agreement	Saved But Not Submitted: Last saved on 5/27/2014 1:01 PM
MENTAL HEALTH: Informed Participation Agreement (Non-Student)	Not Yet Complete: Please provide the requested information with special attention to the required fields.
OCCUPATIONAL MEDICINE: 1. Privacy Notice and Consent to Treat	✓ Completed: Submitted on: Tuesday, May 27, 2014 9:07 AM
OCCUPATIONAL MEDICINE: 2. Authorization for Release of Occupational Health Records	✓ Completed: Submitted on: Tuesday, May 27, 2014 9:07 AM



2 cont'd. Submit SPLAAAF
questionnaire in MyUHS.



Select “**Messages**” in the left column.

UW-Madison MyUHS Testing Spyder ▾

- Home
- Profile
- Appointments
- Groups/Workshops
- Messages**
- Letters
- Forms
- Survey Forms
- Account Statements
- UHS Health Record
- Immunizations

Secure Messages Inbox

[New Message](#) [Refresh](#)

Read	From	Date	Subject
No Current Messages			



Click on **“New Message”** button.

UW-Madison MyUHS Testing Spyder

- Home
- Profile
- Appointments
- Groups/Workshops
- Messages**
- Letters
- Forms
- Survey Forms
- Account Statements
- UHS Health Record
- Immunizations

Secure Messages Inbox

[New Message](#) [Refresh](#)

Read	From	Date	Subject
No Current Messages			



Select “I am a UW Employee, Affiliate or Contract Worker” and click “Continue”.

UW-Madison MyUHS

Home

Profile

Appointments

Groups/Workshops

Messages

Letters

Forms

Survey Forms

Account Statements

UHS Health Record

Immunizations

In addition to students and their domestic partners, UHS provides select services to employees.

PLEASE CHOOSE FROM THE OPTIONS BELOW SO WE CAN DIRECT YOUR MESSAGE TO THE APPROPRIATE SERVICE

Select One

- I am a UW Student or Domestic Partner
- I am a UW Employee, Affiliate or Contract Worker
- I am a UHS Employee

Continue

Cancel



Select “Service Personnel Limited Animal Area Access Form” and click “Continue”.

W-Madison MyUHS Testing Spyder

- Home
- Profile
- Appointments
- Groups/Workshops
- Messages**
- Letters
- Forms
- Survey Forms
- Account Statements
- UHS Health Record
- Immunizations

Please CHOOSE THE QUESTIONNAIRE you need to complete from the list below.

Or, CHOOSE SEND A MESSAGE to the Occupational Medicine Clinic to request information regarding what you need to complete or if you require assistance. The OCCUPATIONAL MEDICINE PRIVACY AND CONSENT FORM and the AUTHORIZATION FOR RELEASE OF OCCUPATIONAL HEALTH RECORDS FORM must be completed and submitted in the FORMS tab of MyUHS (click "CANCEL" to return to the home page and select "FORMS" from the list on the left).

QUESTIONNAIRES completed in this area are submitted directly to Occupational Medicine.

- RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE (complete and submit)
- ANIMAL CONTACT RISK ASSESSMENT QUESTIONNAIRE (complete and submit)
- OM LASER OPERATOR QUESTIONNAIRE (complete and submit)
- SERVICE PERSONNEL LIMITED ANIMAL AREA ACCESS FORM (complete and submit)
- OM REACTIVE TST QUESTIONNAIRE (complete and submit)
- OCCUPATIONAL MEDICINE PRIVACY AND CONSENT FORM (completed in "FORMS")
- AUTHORIZATION FOR RELEASE OF OCCUPATIONAL HEALTH RECORDS FORM (completed in "FORMS")
- SEND A MESSAGE to the Occupational Medicine Clinic



Enter your information for SPLAAAF required fields ** and click “Send” at the bottom.

UW-Madison MyUHS

Testing Spyder

Home

Profile

Appointments

Groups/Workshops

Messages

Letters

Forms

Survey Forms

Account Statements

UHS Health Record

Immunizations

Compose New Secure Message

Recipient: HIM OM
Message Type: OM SPLAAAF
Subject: OM SPLAAAF

Items marked with ** are required.

Service Personnel Limited Animal Area Access Form

This form helps the University protect your health. Many types of animals are on campus. At times you may work near animals or in their environment. There are some hazards you should be aware of when working in areas where animals are or may have been. Risks are usually low, but can be greater when you have certain health conditions.

Campus policy requires staff who may enter animal facilities to complete this form. Your responses to the questions are confidential. Only University Health Services staff will see them. If you have health conditions noted below, UHS will contact you to discuss actions you can take to protect yourself.

** Check your work unit:

- Electrical
- Plumbing
- Steam Fitting
- Maintenance Mechanic
- Carpenter and Mason
- Paint Glazers and Tile Setters
- Machine Shop
- Sheet Metal
- Pest Control
- Lock
- UWPD
- Other (specify below)

If you selected Other above, please specify

** Supervisor Name:
Supervisor email (if known)
Supervisor phone (if known)

Animals

Animals commonly housed at the University include:

- Rats and Mice
- Horses
- Monkeys
- Sheep
- Dogs and Cats
- Pigs
- Cows
- Poultry
- Rabbits
- Others



Click “Send” at the bottom of the form.

- Messages
- Letters
- Forms
- Survey Forms
- Account Statements
- UHS Health Record
- Immunizations

Exposures and Hazards

Hazards in Animal Areas may include:

- Materials that may cause infection
- Animal material that may cause allergies such as fur, dander, or urine
- Chemicals

Protective Measures

- Read and follow safety instructions on door signs
- Talk to the facility or animal area manager about safety rules before entering animal areas
- Wash your hands often
- Talk to your supervisor about concerns
- Clean your tools before leaving animal areas
- Wear safety equipment that facility managers say is necessary
- Wear safety equipment as listed on door signs.

HEALTH CONCERNS - Answers will be confidential and meet UW campus Health Information Portability and Accountability Act (HIPAA)

Do you have any of these health concerns?

** Allergy, particularly to animals Yes No

** Asthma Yes No

** Chronic obstructive pulmonary disease or emphysema Yes No

** Heart valve or heart abnormalities (This is relevant to work with sheep) Yes No

** Compromised immune conditions such as organ transplant, cancer, diabetes, immune system suppression from medications or disease Yes No

** Concerns about pregnancy or reproductive health Yes No

** Would you like to discuss health concerns with a UHS health provider? Yes No

If you have a health condition above, you should talk to your doctor before working in facilities with animals or infectious materials.

3/2/18



Enter missing fields if error window pops up.

The screenshot shows a web form with a modal dialog box titled "Validation Errors". The dialog box contains the following text:

The form was NOT submitted!
You missed 8 fields. They have been highlighted.

An "OK" button is located at the bottom right of the dialog box.

The background form includes the following sections:

- Exposures and Hazards**
 - Hazards in Animal Areas
 - Materials that may cause
 - Animal material that may
 - Chemicals
- Protective Measures**
 - Read and follow safety in
 - Talk to the facility or anim
 - Wash your hands often
 - Talk to your supervisor about concerns
 - Clean your tools before leaving animal areas
 - Wear safety equipment that facility managers say is necessary
 - Wear safety equipment as listed on door signs.

HEALTH CONCERNS - Answers will be confidential and meet UW campus Health Information Portability and Accountabi

Do you have any of these health concerns?

- ** Allergy, particularly to animals Yes No
- This field is required.**
- ** Asthma Yes No
- This field is required.**
- ** Chronic obstructive pulmonary disease or emphysema Yes No
- This field is required.**



Click **“Proceed”** if secure message has been sent.

The screenshot shows a web browser window with the URL `myuhs.uhs.wisc.edu/messages_send_finished.aspx`. The page title is "UW-Madison MyUHS". On the left is a navigation menu with items: Home, Profile, Appointments, Groups/Workshops, Messages (highlighted in blue), Letters, Forms, Survey Forms, Account Statements, UHS Health Record, and Immunizations. The main content area displays "Secure Message Sent" in a large font, followed by the message "Your message has been sent." and a "Proceed" button.



2 cont'd. Submit “OM TB
RISK ASSESSMENT”
questionnaire in MyUHS.



Repeat steps for “OM TB RISK ASSESSMENT” questionnaire (and use previous screenshots as a reference if needed).

> Select “Messages” in the left column

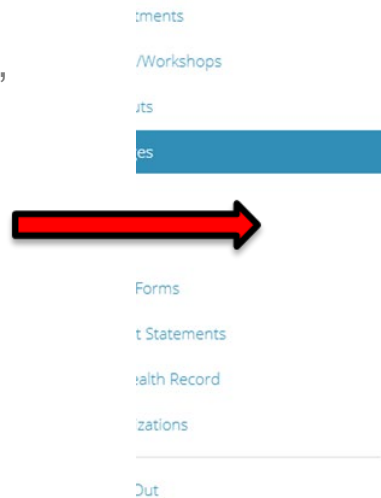
> Click on “New Message” button

> Select “I am a UW Employee, Affiliate or Contract Worker” and click “Continue”

> Select “OM TB RISK ASSESSMENT” and click “Continue”

> Enter your info in all required fields ** and click “Send” at the bottom.

> Click “Proceed” if secure message has been sent.



Please CHOOSE THE QUESTIONNAIRE you need to complete from the list below
Or, CHOOSE SEND A MESSAGE to the Occupational Medicine Clinic to request assistance

The OCCUPATIONAL MEDICINE PRIVACY AND CONSENT FORM and the AUTHORIZATION FOR RELEASE OF OCCUPATIONAL HEALTH RECORDS FORM must be completed and submitted in the FORMS tab of MyUHS (click “FORMS” list on the left).

QUESTIONNAIRES completed in this area are submitted

- RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE (complete and submit)
- ANIMAL CONTACT RISK ASSESSMENT QUESTIONNAIRE (complete and submit)
- OM TB RISK ASSESSMENT (complete and submit)
- OM LASER OPERATOR QUESTIONNAIRE (complete and submit)
- SERVICE PERSONNEL LIMITED ANIMAL AREA ACCESS FORM (complete and submit)
- OCCUPATIONAL MEDICINE PRIVACY AND CONSENT FORM (completed in “FORMS”)
- AUTHORIZATION FOR RELEASE OF OCCUPATIONAL HEALTH RECORDS FORM (completed in “FORMS”)
- SEND A MESSAGE to the Occupational Medicine Clinic



Logout of MyUHS and Canvas.

